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Richard T. Tilley

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

23983

APPLICATION NO.

10/684,106

7590

03/19/2004

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-	The state of the s	* *
	Edna Walsh	(Depositor's name)
	administration	(Signature)
[	6/10/2004	(Date)
	<u> </u>	
FIRST NAMED INVENT	OR ATTORNEY DOCKET NO.	CONFIRMATION NO.

P-6187-04-03

TITLE OF INVENTION: REMOTELY OPERATED OUTRIGGER

FILING DATE

10/14/2003

APPLN. TYPE	SMALL ENTITY	ISSUE F	E <b>E</b>	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$0	\$665	06/21/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS	٦	
WRIGHT, ANDREW D		3617		114-255000	_	
FR 1.363).  ☐ Change of correspond Address form PTO/SB/1 ☐ "Fee Address" indicat	e address or indication of "Fence address (or Change of 22) attached.  Ion (or "Fee Address" Indicator more recent) attached. Us	Correspondence	names of agents Ol firm (hav agent) an	nting on the patent front page. Up to 3 registered patent R, alternatively, (2) the name ing as a member a registered d the names of up to 2 registered or agents. If no name is list inted.	attorneys or 1	Law Firm P
	RESIDENCE DATA TO I  an assignee is identified be d to the USPTO or is being				assignee data is only appropria T a substitute for filing an assi	ate when an assignment
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lease check the appropriate a. The following fee(s) are	e assignee category or category enclosed:	<u> </u>	inted on the p	<del></del>	corporation or other private gr	oup entity 🔲 governm
Issue Fee		A check in the amount of the fee(s) is enclosed.				
☐ Publication Fee		☐ Payment by credit card. Form PTO-2038 is attached.				
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 665.00

Paperwork Reduction Act of 19	995, no persons are required to r	espond to a collection of info	ormation unless it displays a valid OMB control number.	
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		Application Number	10/684,106	
		Filing Date	10/14/2003	
		First Named Inventor	Richard T. Tilley	
		Examiner Name	Andrew D. Wright	
		Art Unit	3617	
OUNT OF PAYMENT	(\$) 665.00	Attorney Docket No.	P-6187-04-03	

Check	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
		3. ADDITIONAL FEES			
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Total Claims	Charge any additional fee(s) or any underpayment of fee(s)	Examiner action —	<del></del>		
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1451 1,510   145		1403 290 2403 145 Request for oral hearing			
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**or number previously paid, if greater; For Reissues, see above	**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 665.0	0		

(Complete (if applicable)) SUBMITTED BY Registration No. Telephone 866-413-0475 24619 Peter D. Sachtjen Name (Print/Type) (Attorney/Agent) For D Sachtye 10/2004 Date Signature

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